

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A26047**

1. Entity Name

MEGA PROPERTY INVESTMENTS, LTD.

Principal Place of Business

**1611A ALDEN ROAD
ORLANDO FL 32803**

Mailing Address

**1611A ALDEN ROAD
ORLANDO FL 32803**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3131146

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DUE BY MAY 1, 2002

6. Name and Address of Current Registered Agent

**HANS, KAMAL
620 FERGUSON DRIVE
ORLANDO FL 32805**

7. Name and Address of New Registered Agent

Name
W & P Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1936 Lee Road
Suite 101
City
Winter Park **FL** Zip Code
32789

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

David A. Webster, President

DATE

9. Capital Contributions as Shown on record.

\$2,959,308.00

10. Amount of Capital Contributions in FLORIDA to date

\$2,959,308.00

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **S13417**
NAME **IVORY INVESTMENTS, INC.**
STREET ADDRESS **1611A ALDEN ROAD**
CITY-ST-ZIP **ORLANDO FL 32803**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Deepinder Sahni

2/14/02

407-691-0500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

CR2E003 (9/01)

0008221 AT

FILED

02 FEB 19 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

